PROGRESS SHEET – APPLICATION FOR WATER RIGHT
☐ SURFACE WATER ☒ GROUND WATER

NAME: **Solar Pines Water Association**   CONTACT: **George L. Wallace**
P.O. Box 193   P.O. Box 25
Chewelah, Washington 99109-0193   Chewelah, Washington 99109-0025
509-935-4655   509-935-4655

☐ ASSIGNED (SEE BACK OF PAGE)

STEVENS COUNTY   WRIA (59)   WRTS No. **G3-30503**
COLVILLE RIVER BASIN   ID No. _4265389_

APPLICATION NO.: G3-30503   **PRIORITY DATE: December 15, 2005**

Date App rec'd: <u>December 15, 2005</u>   Date fee rec'd: <u>12-15-2005</u>   Amount $50.00   Check No.: 917

Statement of additional exam. fee: $_____   Sent: _____   Rec'd: _____

Returned for completion or correction: _____   Rcvd: _____

PUBLICATION: ☒ SPOTTED

Newspaper(s): **Chewelah Independent or Statesman-Examiner**

OK'd by: **K.A.Yerbich**_____   Date Notice Sent ___3-22-2006___

Date Affidavit rec'd: ___4-10-2006___   Time expires: ___5-6-2006___

Checked by: ___Kayerbich___   Date: ___4-11-2006___

☐ Protests: _____   ☐ Fee rec'd: _____

4-12-06 FP 2 WW

INTERESTED PARTIES:
☐ WDFW ☒ State DOH ☒ County DOH ☒ Tribe ☐ USBR ☐ W²FO ☐ EphrataFO ☐ _____
3/22KLA   3/22KLA   KLA3/22

WDFW COMMENT: ☐ YES ☐ NO Note: _____

FISH SCREEN: ☐ YES ☐ NO   LOW FLOW PROVISO: ☐ YES ☐ NO

OTHER COMMENT(S): _____

FIELD EXAMINATION REQUIRED: ☐ YES ☐ NO

EXAMINATION DATE	ROE ISSUED	SUP. ROE ISSUED	PERMIT ISSUED	SUP. PERMIT ISSUED

DEVELOPMENT SCHEDULE:

BC due: _____   EXT to: _____   BC filed: _____

WELL LOG(S) RECEIVED: ☐ YES ☐ NO Note: _____

CC due: _____   EXT to: _____   CC filed: _____

PA due: _____   EXT to: _____   PA filed: _____

METER INSTALLED: ☐ YES ☐ NO Meter ID No.: _____

FISH SCREEN INSTALLED: ☐ YES ☐ NO Note: _____

PA FIELD EXAMINATION REQUIRED: ☐ YES ☐ NO

Date examination made: _____   By: _____

APPROVED FOR CERTIFICATE: ☐ YES ☐ NO

Cert. fee: $_____   Date letter sent: _____   Fee rec'd: _____   Check No.: _____

Date Certificate issued: _____

cc: Mr. Gary Passmore, Colville Confederated Indian Tribe, P.O. Box 150, Nespelem, Washington 99155-0150
~~Washington Fish and Wildlife, 600 Captiol Way North, Olympia, Washington 98501~~
Eastern Drinking Water Operations, Washington State Depratment of Health, 1500 W 4TH Ave Suite 305, Spokane Wa 99204
Jim Matsuyma, Northeast Tri-County, Stevens County Health District, Po Box 270, Colville Wa 99114-0270

G3-30503

ASSIGNMENT INFO: SUBJECT TO REAL ESTATE EXISE TAX

Assignment received: _____   **Assignment approved:** _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____   **Assignment approved:** _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____   **Assignment approved:** _____

Assignee: _____

Address: _____

Phone #: _____

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Initial: _____

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Address: _____

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